IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Martin M. Zentner et al.	:
••	: Art Unit: 1792
Serial No.: 10/750,460	:
	: Examiner: Chaudhry, Saeed T.
Filed: December 31, 2003	:
	:
For: APPLIANCE METHODS AND	:
APPARATUS	;
Commissioner for Patents	

P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL

EXTENSION OF TERM

3.	3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.										
	(complete (a) or (b), as applicable)										
	(a) Applicant petitions for an extension of time under 37 C.F.R. 1.136 (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)										
Extension for response within:					her than small entity Fee	Small entity Fee (if applicable)					
		\boxtimes	first month	\$ 1	130.00	\$ 65.00					
			second month	\$ 4	190.00	\$ 245.00					
			third month	\$ 1,	110.00	\$ 555.00					
			fourth month	\$ 1,	730.00	\$ 865.00					
			fifth month	350.00	\$1,175.00						
					Fee Due	\$ 130.00					
If an additional extension of time is required, please consider this a petition therefor. (Check and complete the next item, if applicable)											
An extension of months has already been secured. The fee paid therefor \$ is deducted from the total fee due for the total months of extension now requested.											
Extension fee due with this request \$											
OR Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.											

FEE FOR CLAIMS

i. ′	The fee for claims (37 (Col. 1)		(Col. 2) (Col. 3)		SMALL ENTITY		OTHER THAN SMALL ENTITY			
	, ,	CLA		HIG				•		
	REMAIN	NG		HEST NO.	P	ADDITION				TION
		AFTER		PREVIOUSLY	RESENT	AL. RATE FEE	R		AL RATE	FEE
	AMENDM	ENI		PAID FOR	EXTRA =	x \$26.00 =	Τ		x \$52.0	
OTAL			INUS _			\$		\$		
NDEP.			INUS		=	x \$110.00 =		\$	x \$220	
CLAIM		FIRS	F PRESENT.	ATION OF MULTI	PLE DEP.	+ \$195.00 =		\$	+ \$390	= 00.0
CLAIM		-	-	<u> </u>		TOTAL ADDITIONAL FEE \$	R	ADDIT	TOTA IONAL FEE	L \$
	(a)	\boxtimes	No add	itional fee fo	r Claims is	required				
					OR					
	(b)		Total a	dditional fee	for claims	required \$				
				F	EE PAYM	ENT				
5.	Attached is a check in the sum of \$									
				this transmit	tal is attach		<u>00</u>			
6.		FEE DEFICIENCY any additional extension and/or fee is required, charge Deposit Account No. 1-2384.								o.
					AND/O	R				
		any 384.	addition	al fee for clai	ims is r e qu	ired, charge Depos	it Ac	count N	o. 01 -	
7.		ther:								
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					Eric	T. Krischke				
					Res	g. No. 42,769				
						MSTRONG TEAS	SDAL	E LLP		
						Metropolitan Squ			00	
						Louis, MO 63102			~ •	
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